

O I P E 14977
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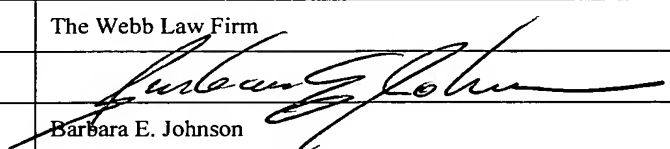
TFW 1241

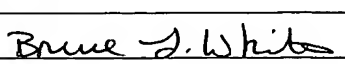
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/036,066	
	Filing Date	November 7, 2001	
	First Named Inventor	Scott L. Diamond	
	Art Unit	1641	
	Examiner Name	Ann Y. Lam	
Total Number of Pages in This Submission	20	Attorney Docket Number	3936-011568

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Post Card/Expert's Declaration (1 p.)/EXHIBITS A-G/Check in the amount of \$225.00
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	The Webb Law Firm		
Signature			
Printed Name	Barbara E. Johnson		
Date	August 23, 2006	Reg. No.	31,198

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Bruce L. White	Date	August 23, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**TRANSMITTAL LETTER**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application No.: 10/036,066Filing Date: November 7, 2001Examiner: Ann Y. LamGroup Art Unit: 1641Invention: PEPTIDE OR PROTEIN MICROASSAY METHOD AND APPARATUS

Transmitted herewith is an Amendment in the above-identified application.

- ☒ Small Entity Status is/has been asserted for this application under 37 CFR 1.27.
A verified statement to establish small entity status under 37 CFR 1.27 is enclosed.
☒ No additional fee is required.
The fee has been calculated as shown below:

	No. of Claims After Amendment	Highest No. Previously Paid For	Present Extra	Small Entity Rate	Non-Small Entity Rate	Charge
Total	<u>18</u>	<u>20</u>	<u>0</u>	x \$ 25.00	x \$ 50.00	\$ <u>0</u>
Indep.	<u>2</u>	<u>3</u>	<u>0</u>	x \$100.00	x \$200.00	\$ <u>0</u>
First Presentation of Multiple Dependent Claim/s				+ \$180.00	+ \$360.00	\$ <u>0</u>
TOTAL ADDITIONAL FEE						\$ <u>0</u>

- ☐ A check in the amount of \$_____ is enclosed to cover the additional fee.
☒ A check in the amount of \$ 225.00 is enclosed for a two-month Petition for Extension of Time.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650. An original and two copies of this sheet are enclosed.
☒ Any additional filing fees required under 37 CFR 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.

August 23, 2006

Date

By 

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